



WASHOE COUNTY SCHOOL DISTRICT INFINITE CAMPUS PARENT PORTAL FERPA CONSENT FORM

I consent to the disclosure of the following educational records of my child to Nevada colleges and universities. I understand that the following educational records will be available to all Nevada colleges and universities for placement and possible scholarship/college funding opportunities. I am giving permission (consent) for access to my child's information.

Student Information:
(Please print)

Last Name	First Name	Middle Name	Date of Birth
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All of the following educational records are approved for release:

- Demographics, such as student ID number, phone number, address, Free and Reduced Lunch Information
- Transcripts
- Assessment

Name of parent/guardian consenting to provide access to the above listed data to Nevada colleges and universities:

Parent/Guardian (Print name)	Date	Parent/Guardian (Signature)
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Written consent of parents is usually required for the release of personally identifiable records or other information protected by the Family Education and Privacy Act to agencies or individuals. Agencies or individuals may not share information with any other party without the written consent of the parents unless entitled to do so under FERPA 99.33.

You may revoke this authorization at any time. Unless revoked earlier, this consent will remain in effect until June 30 of the current school year.

- Note: The party receiving the educational records is hereby notified of the following:
- (1) The educational records are to be used only for the described purpose;
 - (2) The educational records may not be re-disclosed without written consent of the parent, guardian, or eligible student.

Washoe County School District Office Use Only:

Consent indicated in IC on	_____	
	Date	
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Signature of Designated Staff Person Fulfilling Request	_____	Date